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Bib Data Sheet

CONFIRMATION NO. 4260

SERIAL NUMBER 09/367,361	FILING DATE 08/11/1999  RULE	CLASS 424	GROUP ART UNIT 1615	ATTORNEY DOCKET NO. 4-21233/A
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## APPLICANTS

BURKHARD SCHLUTERMANN, MERZHAUSEN, GERMANY;

\*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/EP98/00794 02/12/1998

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

SWITZERLAND 331/97 02/14/1997

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GERMANY	SHEETS DRAWING	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials		

## ADDRESS

1095  
THOMAS HOXIE  
NOVARTIS, CORPORATE INTELLECTUAL PROPERTY  
ONE HEALTH PLAZA 430/2  
EAST HANOVER, NJ  
07936-1080

## TITLE

OXACARBAZEPINE FILM-COATED TABLETS

FILING FEE

RECEIVED  
1074

FEES: Authority has been given in Paper  
No. \_\_\_\_\_ to charge/credit DEPOSIT ACCOUNT  
No. \_\_\_\_\_ for following:

<input type="checkbox"/> All Fees
<input type="checkbox"/> 1.16 Fees ( Filing )
<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
<input type="checkbox"/> 1.18 Fees ( Issue )
<input type="checkbox"/> Other _____

SERIAL NUMBER 09/367,361	FILING DATE 08/11/99	CLASS 424	GROUP ART UNIT 1815	ATTORNEY DOCKET NO. 4-21233/A
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APPLICANT

BURKHARD SCHLUTERMANN, MERZHAUSEN, FED REP GERMANY.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED



\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED THIS APPLN IS A 371 OF PCT/EP98/00794 02/12/98



\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED SWITZERLAND 331/97 02/14/97



IF REQUIRED, FOREIGN FILING LICENSE GRANTED 10/28/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY DEX	SHEETS DRAWING 0	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 6
Verified and Acknowledged	Examiner's Initials	Initials			

SEE CUSTOMER NUMBER: 001095

AD. RESS

TITLE

OXACARBAZEPINE FILM-COATED TABLETS

FILING FEE RECEIVED  \$1,074	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees <input type="checkbox"/> 1.17 Fees <input type="checkbox"/> 1.18 Fee <input type="checkbox"/> Other <input type="checkbox"/> Credit
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DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 367361	RECEIPT DATE:	08 / 11 / 9
IA NUMBER:	PCT/ EP98 / 00794	IA FILING DATE:	02 / 12 / 9
FAMILY NAME:	SCHLUTERMAN	DELAY WAIVED (Y/N):	
GIVEN NAME:	BURKHARD	DEMAND RECEIVED (Y/N):	
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	02 / 14 / 9
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	
ATTORNEY DOCKET NUMBER:	4-21233/A	COUNTRY:	EPX
CORRESPONDENCE NAME/ADDRESS:		CUSTOMER NUMBER:	001095
		TELEPHONE	908522694
		FAX	
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	NOVARTIS CORPORATION		
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	564 MORRIS AVENUE		
CITY:	SUMMIT		
STATE/COUNTRY:	NJ	ZIP:	079011027
EMAIL:			
APPLICATION TITLES:			
	OXACARBAZEPINE FILM-COATED TABLETS		

TAB TO LAST POSITION,PUSH SEND